**NEVADA FINANCIAL DISCLOSURE STATEMENT** 

DOUGLAS COUNTY CLERK

(Attach additional sheets if necessary.)

NAME CARL T. STRICKLAN	LENGTH OF RESIDENCE IN NEV			ADA 7 1EARS RICT WHERE REGISTERED TO		
200 00 00	9448 VOTE	_	<u>YEARS</u>			
TELEPHONE			NRS 281.571(1)	)( <b>=</b> )		
List all public offices for which this financial disclosu	re statement is r	equired (NRS 2	81.571, Subsection ANNUAL all elected and appointed public officers	1 1(g)]; CANDIDATE (no later than the 10 <sup>th</sup> day after the last day	APPOINTME to fill unexpired of an elected appointed put	
the second secon			(no later than Jan. 15 each year)	to cuptifu as a	officer (within 30 day	
Public Office	Annual Compensation	Term or Date Appointed	NRS 281.559(1)(b) 281.561(1)(b)	NAS 281.561(1)(s)	NRS 281,559(1)(a)	
AKERIDGE GID BOARD	: <b>B</b>	2005				
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	\$		. 🗆			
PEAL ESTATE						
ist each creditor to whom you or a member of your or deed of trust on real property which is not require ehicle for personal use was retained by seller] [NRS	d to be listed be	low, and (2) de				
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List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity INRS 281.571, Subsection 1(f):

TAHOE ZEPH	IR LEMP	· 1-1-6-		Self	Member
TAHOE POINT	CORPOR	r n on			
		<del></del>		□	
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		•			,
List specific location and particular your household has a legal or bene	use of all real estate (official interest; (2) the fail	other than personal re	sidence): (1) in which th is \$2,500 or more;	you or a mand (3) locat	ember of ed in this
state or an adjacent state [NRS 281.5			aPadiouter 11	100 F.E	
NONE Specific	Location	·	(UG)	WC	
				-	<del>, , , , , , , , , , , , , , , , , , , </del>
List the identity of donor and value	of each gift received in	excess of an aggreg	gate value of \$200 fro	om a donor	
during the preceding taxable year   consanguinity or affinity; and (2) ce	except (1) a gift receive	ed from a person who	is related to you with	in the third o	degree of
occasion if the donor does not have					<i>A</i>
[NRS 281.571, Subsection 1(e)]:	Donor			Valyes	g GIN
7000				\$	
				\$ \$	
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THE INFORMATION I HAVE PROV	IDED HEREIN IS ACCI	URATE AND COMPL	ETE.		
1/-/0					
Date:	Signature;	A	MAL	<u> </u>	